# FORM D MAR - 5 2007

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# FORM D

Expires: April 30, 1991
Estimated average burden
hours per response ... 16.00

OMB Number:

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

07045750

OMB APPROVAL

3235-0076

Name of Offering (D'check if this is an amendment and name has changed, and indicate change., LAUGHALOT LONDON L.P.

Filing Under (Check box(es) that apply): D Rule 504. D Rule 504. D Rule 504. D Rule 504.

Filing Under (Check box(es	i) that apply):	5 D Section 4(6) D	JLOE
Type of Filing:			JEGE
	A. BASIC IDENTIFICATION DAT	A CONTRACTOR OF THE STATE OF TH	
1. Enter the information re-	quested about the issuer		
Name of Issuer ( check Laughalot London L.P	if this is an amendment and name has changed, and indi	cate change.)	
	60 West 44th St., Suite 600, New York, NY 10036	(212)575-08	duding Area Code)
Address of Principal Busine (if different from Executive	ess Operations (Number and Street, City, State, Zip Code) Offices)	Telephone Number (Inc	<del></del>
Brief Description of Busines	Financier of the London production of the drar musical work entitled "Monty Python's Spama		PROCESSED MAR 0 7 2007
Type of Business Organizati  corporation  business trust	on  limited partnership, already formed  limited partnership, to be formed	Other (please specify):	THOMSON
	Incorporation or Organization:    Month   Year     0   1   0   6	☐ Actual ☐ Estimate observiation for State: purisdiction)	đ

## **GENERAL INSTRUCTIONS**

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.5012 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the Issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

# A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: · Each promoter of the issuer, if the issuer has been organized within the past five years; · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. □ Director ☐ Executive Officer ☐ General and/or Check Box(es) that Apply: Promoter □ Beneficial Owner Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address ☐ Executive Officer □ Director □ Beneficial Owner ☐ General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address ☐ Beneficial Owner ☐ Executive Officer □ Director □ General and/or Check Box(es) that Apply: ☐ Promoter Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address ☐ Beneficial Owner ☐ Executive Officer □ Director □ General and/or Check Box(es) that Apply: ☐ Promoter Managing Partner Full Name (Last name first, if Individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) □ General and/or □ Director ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐.General and/or □ Executive Officer □ Director □ Promoter ☐ Beneficial Owner Check Box(es) that Apply: Managing Partner Pull Name (Last pame first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address ☐ Executive Officer □ Director ☑ General and/or □ Beneficial Owner ☐ Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address

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1 22							OUT OFF					Yea	No
1. IN 813	the issuer	sold, or de	es the issu	uer intend	to sell, to	non-accre	dited inves	tors in thi	offering?	<u>'</u>	• • • • • • •	. 🗖	Ø
			An	swer also i	л Append	ix, Colum	n 2, if filir	ig under L	ILOE.				
2. What	is the mi	nimum inv	estment th	at will be	accepted i	rom any i	ndividua)?				· · · · · · · ·	. s_N/.	A
						_						Yes	No
													D
sion o to be list th	or similar t listed is ar	emuneration associated the broke	on for solid d person o r or dealer	ritation of p r agent of r. If more	purchasers a broker o than five (	in connect or dealer re 5) persons	ion with sa egistered w to be liste	des of secu ith the SE d are asso	rities in the Cand/or	directly, an e offering. I with a state ons of sucl	lf a person or states	n	
Full Name	(Last nan	ne first, if	individual	)					<del></del>				
				N	Ά								
Business o	r Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	de)						
Name of /	Associated	Broker or	Dealer			<del>-</del>				<del>-</del>		·	
States in V	N'hich Pers	on Listed	Has Solici	ited or Int	ends to So	licit Purch	asers		<del></del>	<del></del>			
(Check	"All States	or chec	k individu	al States) .							·	□ Alt	States
[AL]	[AK]	{AZ}	[AR]	[CA]	(CO)	[CT]	[DE]	[DC]	[FL]	[GA]	(H1)	LID.	)
[11.]	[ IN ]	[ IA ]	[ KS ]	{KY}	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	(MO	-
[MT]	[NE]	[NV]	(NH)	ן נא ן	[NM]	{NY}	{NC}	[ND]	[OH]	[OK]	(OR)	[PA]	_
[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	(WV)	[WI]	[WY]	; PR	<u> </u>
Full Name	(Last nan	ne first, if	individual	1)									
		-											
		٠.											
Business o	r Residenc	e Address	(Number	and Street	, City, Sta	ite. Zip Co	ode)						
Business o	or Residenc	e Address	(Number	and Street	, City, Sta	ite. Zip Co	xde)						
	or Residence			and Street	, City, Sta	ite. Zip Co	ode)						
Name of A		Broker or	Dealer										
Name of A	Associated	Broker or	Dealer Has Solic	ited or Int	ends to Sc							□ Alı	State
Name of A	Associated Which Pers	Broker or	Dealer Has Solic	ited or Int	ends to Sc			[DC]	[FL]	[GA]	(ні)	∏A ⊡	
Name of A	Associated Which Pers	Broker or	Dealer Has Solic	ited or Int	ends to Sc	licit Purch	(DE)	[MA]	[MI]	[MN]	[MS]	[MO	} }
Name of A States in V (Check [AL] [IL] [MT]	Associated Which Pers "All State [AK] [IN] [NE]	Broker or  son Listed s'' or chec [AZ] [IA] [NV]	Dealer  Has Solic k individu {AR} [KS] [NH]	ited or Int al States) {CA} {KY} {NJ}	(CO)	CT   [ME]	(DE) (MD) (NC)	[MA] [ND]	[M]]	[MN] [OK]	[MS] [OR]	I ID IMO I PA	} } }
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Name of A States in V (Check [AL] [IL] [MT] [RI]	Associated Which Pers "All State [AK] [IN] [NE]	Broker or  son Listed s'' or chec [AZ] [IA] [NV] [SD]	Dealer  Has Solic k individu {AR} [KS] [NH] [TN]	ited or Int (al States) [CA] [KY] [NJ] [TX]	(CO)	CT   [ME]	(DE) (MD) (NC)	[MA] [ND]	[M]]	[MN] [OK]	[MS] [OR]	I ID IMO I PA	} } }
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Name of A  States in \ (Check [AL] [IL] [MT] [RI] Full Name	Associated Which Pers "All State {AK} [IN] [NE] [SC] e (Last name	Broker or  son Listed s'' or chec [AZ] [IA] [NV] [SD] ne first, if	Dealer  Has Solic k individu {AR} [KS] [NH] [TN]	ited or Intial States) [CA] [KY] [NJ] [TX]	(CO) (LA) (NM) (UT)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[MA] [ND]	[M]]	[MN] [OK]	[MS] [OR]	I ID IMO I PA	} } }
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Name of A  States in V  (Check {AL} {IL} {MT} I RI  Full Name  Business of A  States in V	Associated  Which Pers  "All State [AK] [IN] [NE] [SC]  e (Last name  or Residence  Associated  Which Pers	Broker or  son Listed s'' or chec [AZ] [IA] [NV] [SD] ne first, if the Address Broker or son Listed	Dealer  Has Solic k individu [AR] [KS] [NH] [TN] individual	ited or Intial States) {CA} {KY} {NJ} {TX}	(CO) (LA) (NM) (UT)	(CT) [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[MA] [ND]	[M]]	[MN] [OK]	[MS] [OR]	I ID IMO I PA	) ) ) )
Name of A  States in V  (Check [AL] [IL] [MT] [RI]  Full Name  Business of A  States in V	Associated Which Pers "All State {AK} {IN} {NE} {SC} e (Last name)  Associated	Broker or  son Listed s'' or chec [AZ] [IA] [NV] [SD] ne first, if the Address Broker or son Listed	Dealer  Has Solic k individu [AR] [KS] [NH] [TN] individual	ited or Intial States) {CA} {KY} {NJ} {TX}	(CO) (LA) (NM) (UT)	(CT) [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[MA] [ND]	[M]]	[MN] [OK] [WI]	[MS] [OR] [WY]	I ID IMO I PA I PR	State
Name of A  States in V  (Check {AL} [IL] [MT] [RI]  Full Name  Business of A  States in V  (Check	Associated  Which Pers  "All State {AK} {IN} {NE} {SC} e (Last name or Residence  Associated  Which Pers  "All State	Broker or  son Listed s'' or chec [AZ] [IA] [NV] [SD] ne first, if ce Address  Broker or son Listed s'' or chec	Dealer  Has Solic k individu {AR} [KS] [NH] [TN] individual (Number  Dealer  Has Solic k individu	ited or Intial States) {CA} {KY} {NJ} {TX}	(CO) (LA) (NM) (UT)	CT     ME     NY     VT	(DE) (MD) (NC) (VA)	[MA] [ND] [WA]	[M] [OH] [WV]	[MN] [WI]	[MS] [OR] [WY]	J JD IMO I PA I PR	State

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PR	OCEEDS		
<ol> <li>Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.</li> </ol>				
Type of Security		gregate ing Price	Am	ount Already Sold
Debt	<b>s</b>	0	\$	0
Equity	<b>S</b>	0	2	0
□ Common □ Preferred			-	
Convertible Securities (including warrants)	<b>5</b>	0	\$	0
Partnership Interests			<b>S</b> _10	0,710,000
Other (Specify)	<b>s</b>	0	<u></u>	0
Total	\$ 10,71	10,000	s_10	0,710,000
Answer also in Appendix, Column 3, if filing under ULOE.				
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		ımber	Dol	Aggregate Lar Amount
A amount to the second to the		restors 104		Purchases 710,000
Accredited Investors		104	\$	0
Non-accredited Investors			\$	0
Total (for filings under Rule 504 only)			<b>S</b>	
Answer also in Appendix, Column 4, if filing under ULOE.				
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
Type of offering		pe of curity	Doll	lar Amount Sold
Rule 505			<b>S</b>	N/A
Regulation A		· · · · · · · · · · · · · · · · · · ·	<b>S_</b> _	N/A
Rule 504			<b>S</b>	N/A
Total			<u> </u>	N/A
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future confingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		· •		
Transfer Agent's Fees		0	\$	0
Printing and Engraving Costs		[2]	<u> </u>	1,000
Legal Fees		-	5	20,000
Accounting Fees			\$	1,500
Engineering Fees			<u> </u>	0
Sales Commissions (specify finders' fees separately)		• –	<u> </u>	0
Other Expenses (identify)			<b>S</b>	0
Total	• • • • • • •	🗹	<b>s</b> _2	22,500

C. OFFERING PRICE, N	UMBER OF INVESTORS, EXPENSES	AND USE (	F PROCEE	YS	<del></del>
b. Enter the difference between the aggregation 1 and total expenses furnished in respuradjusted gross proceeds to the issuer."	gate offering price given in response to Pa	art C - Ques-			0,687,500
<ol> <li>Indicate below the amount of the adjusted used for each of the purposes shown. If the estimate and check the box to the left of the the adjusted gross proceeds to the issuer at</li> </ol>	gross proceeds to the issuer used or pro- te amount for any purpose is not known	oposed to be		<b>-</b>	<u> </u>
	·•		Payments to Officers, Directors, & Affiliates	P	ayments To Others
Salaries and fees	***************************************	🗅 🖫	0	<b>D</b> \$	40,000
	***************************************				0
	tion of machinery and equipment				
	ngs and facilities				
Acquisition of other businesses (includi- offering that may be used in exchange	ng the value of securities involved in thi	is			
					0
				□ <b>\$</b>	
	••••••••••••••			D \$ 10	,647,500
Other (specify):		D \$_	0	D <b>\$_</b> _	0
			0	D \$	0
Column Totals					,687,500
Total Payments Listed (column totals a					
	D. FEDERAL SIGNATURE		<del></del>	<u> </u>	<del></del> -
		<u>.</u>		····	
The issuer has duly caused this notice to be sign following signature constitutes an undertaking by quest of its staff, the information furnished by	IV the issuer to furnish to the U.S. Securi	ities and Evch	ence Commis	.:	
Issuer (Print or Type)	Signature ,	<del></del>	Date		<del></del>
Laughalot London L.P.	Mobat Bres	M		29/07	
Name of Signer (Print or Type) Robert Boyett Theatricals LLC By: Robert Boyett	Title of Signer (Print or Type)  Manager of Genera	•			

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-ATTENTION-

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SECNATURE		
1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?	Yes	No ☑
See Appendix, Column 5, for state response.		

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is flied, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Laughalot London L.P.	Signature Hourt Boyns	Date 1/29/07
Name (Print or 15pe) Robert Boyett Theatricals LLC By: Robert Boyett	Title (Print or Type)  Manager of General Partner	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX				\$ 1.
1	Intend to non-a investor	to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item!)		amount pur	investor and chased in State C-Item 2)		Disqual under Sta (if yes. explan waiver	5 lification ate ULOE , attach ation of granted) E-Item1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ.									
AR									
CA		X	Ltd. Partnership \$1,340,655,75	13	F1,340,655.75	0	0		X
co		X	Ltd , Partnership 843 893-44	1	\$43,843.44	0	٥		X
ст		X	Ltd. Partnoship 11,868 534.58	4	*1,868,524.58	0	0		X
DE		X	Ltd. Partnership 31,065.055.74	2	51,0 KJ,655.74	0	O		X
DC									
FL		X	Ltil. Partneship 7329,200.82	4	8329, 200.82	0	U		X
GA		Х	Ltd .Partneship 9109.733.61	2	\$189,733.6/	0	0		K
HI			,						
ID				!					
IL		Х	Ltd. Partneship \$1,306,750.04	38	71,306,750-04	0	0		X
IN		X	4d.Partnership \$19,659.38	1	\$17,557.38	0	Ũ.		X
IA		X	Ltd. Partneship \$21,946.72	1	\$4,946.72	· 0	O		X
KS									
KY									
LA									
ME									
MD				·					
MA			· · · · · · · · · · · · · · · · · · ·						
MI									
MN									
MS					•				
мо		Χ	Ltd Partnership	3	F181,735.60	O	D		X

APPENDIX

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1		2	3			4	<u></u> .	,	5 lification
	to non-a investor	to sell eccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Number of Number of Accredited Non-Accredited					Yes	No
MT					<u></u>			<u> </u>	
NE									
NV				:			·		
NH									
IJ		Х	Ltd. Partnership 9/0,973.36		110,973.36	D	0	<u> </u>	X
NM									
NY		Х	Ltd. Partnership 13,334, 985. U.Z.	34	+3,33 <b>+,98</b> 5.62	U	0		X
NC		Χ	14. Partnership \$21.946.72	,	821.946.72	0	U	<u> </u>	X
ND								ļ	
ОН				<u> </u>					
ОК		Χ	Ltd. Partneship Fal, 946.72	1	821,946.72	D	٥		X
OR				·					
PA	<u> </u>	Χ	14d. Poutneship 1843, 893. 44	2	343,893-44	0	0	<u></u>	X
RI		Х	Ltd. Partnership	1	24946.72	0	٥		·X
sc								<u> </u>	
SD								<u> </u>	
TN		Х	Ltd. Partnership 121,446.72	- 1	\$1,946.20	. 0	O		X
ТX									
UT									
VT									
VA		Χ	Ltd. Partneship \$57,786.89	<i>j</i> .	F87,786.89	O	0	<u> </u>	X
WA			l						
wv									
WI		Χ	Ltá. Pürtnership 971 946-72	1	\$21,946.72	0	0		X
WY									
PR								E	$\mathcal{N}_{\mathcal{D}}$